St Helens Cares Primary Care Group

Date of meeting:	17 January 2024
Agenda Item No:	
Report Title:	Vista Road Surgery Kinnock Park Branch Surgery Closure Application
Report Author (Name and Role)	Kirk Benyon, Senior Contract Manager – Primary Care

Committee/Advisory Group previously presented

Executive Summary and key points for discussion

This report provides details of a business case submitted by Vista Road Surgery to request approval to close the branch surgery located at Kinnock Park, Burtonwood. Details of the Business case and application are included in this report at Appendix A and B.

Recommendation/

The Primary Care Group is asked to:

- 1) note the contents of this report
- 2) approve the application by Vista Road Surgery for the closure of their branch surgery at Kinnock Park, Burtonwood

X X

Consideration for publication

Meetings of the Integrated Care Board will be held in public and the associated papers will be published unless there are specific reasons as to why that should not be the case. This paper will therefore be deemed public unless any of the following criteria apply (please insert 'x' as appropriate:

The item involves sensitive HR issues

The item contains commercially confidential issues

Some other criteria. Please outline below:

Which purpose(s) of an Integrated Care System does this report align with?

Please insert 'x' as appropriate:

- 1. Improve population health and healthcare
- 2. Tackle health inequality, improving outcome and access to services
- 3. Enhancing quality, productivity and value for money
- 4. Helping the NHS to support broader social and economic development

C&M ICB Priority report aligns with:

Please insert 'x' as appropriate:

- 1. Delivering today
- 2. Recovery

C&M ICB Priority report aligns with:	
3. Getting Upstream	X
4. Building systems for integration and collaboration	X

Does this report provide assurance against any of the risks identified in the Board Assurance Framework or any other corporate risk? (please list) N/A

What level of assurance does it provide?

Limited Reasonable Significant

Any other risks? Yes / No. If yes please identify within the body of the report.

Is this report required under NHS guidance or for statutory purpose? (please specify) N/A

Any Conflicts of Interest associated with this paper? If Yes please state what they are and any mitigations. No

Any current services or roles that may be affected by issues within this paper? No

	Process Undertaken	Yes	No	N/A	Comments (i.e. date, method, impact e.g. feedback used)
	Financial Assessment/ Evaluation		Χ		
Document Development	Patient / Public Engagement	X			All patients of the surgery have been engaged with via letter. Vista Road Surgery held face to face sessions and utilised a patient survey to gather information.
Ē	Clinical Engagement			Χ	
newn	Equality Analysis (EA) - any adverse impacts identified?	Х			The EIA is included and referred to within this report
၁၀(Legal Advice needed?		Χ		
	Report History – has it been to other groups/ committee input/ oversight (Internal/External)	X			The former St Helens CCG Primary Care Committee. Warrington Health Scrutiny Committee has been informed and will have a follow up report following decision.

Next Steps:

If approved patients will then need to be informed of the outcome and future options to access services.

Responsible Officer to take forward actions:

1. Practice Submitted Business Case

3. Equality Assessment

2. Practice Application To Close the Branch Surgery

Appendices:

Vista Road Surgery Branch Surgery Closure Application

1. Executive Summary

Vista Road Surgery (VR) is located in the Earlestown area of St Helens and has a branch surgery at Kinnock Park, Burtonwood. This site was closed in 2020 on a temporary basis due to building and staffing issues. It has never reopened. Burtonwood is a village between St Helens and Warrington that sits within Warrington Borough Local Authority. The Doctors from VR had previously approached St Helens CCG in June 2020 proposing to permanently close the branch surgery. Due to various issues, including the ongoing Covid-19 pandemic between 2020 and 2022, this process was delayed and in October 2022 the Doctors at VR approached St Helens Place requesting things move forward with their proposal to engage with patients in relation to permanently closing the branch surgery.

Due to the national issues of recruitment and difficulties maintaining General Practice provision the partners at Vista Road no longer believe it is safe to provide services across two sites and re-opening the branch would bring significant risks to the provision of services at the main surgery site.

Every registered patient of Vista Road Surgery was contacted by letter with the proposals, the reasons and the offer to attend face to face engagement sessions. The engagement sessions were held and questionnaires circulated to gather views from the registered population. A formal business case and application from Vista Road Surgery to close their branch surgery permanently has now been submitted.

2. Introduction / Background

Burtonwood is a village located between St Helens and Warrington but is within the Warrington Borough Local Authority boundary. There are two GP surgeries within Burtonwood but both are branch surgeries belonging to St Helens GP practices, Vista Road Surgery (VR) and Patterdale Lodge Medical Centre (PLMC). This means the patients are registered with a St Helens practice for primary health care but tend to migrate to Warrington for other health services. This has for some time caused issues around accessing support services. The VR branch surgery is known as Kinnock Park (KP) and the PLMC branch is known as Burtonwood Surgery (BS).

VR approached St Helens CCG in June 2020 and then subsequently St Helens Place in November 2022 to commence a process to engage with patients to discuss their proposal to permanently close the branch surgery at KP, Burtonwood.

The issue of GP services in Burtonwood has been on-going for some time with patients regularly experiencing issues accessing community support services following a hospital interaction due to cross boundary issues.

At present VR has 1332 patients registered who reside in Burtonwood from a total practice registered list of 8607.

Whilst VR practice are very keen to keep as many patients as possible who reside in Burtonwood, the permanent closure may mean that patients want to change surgeries to one that has more local access. They have applied for planning permission to extend the car park, at VR, to mitigate any risk of increased traffic. In discussions with PLMC it was confirmed they have no plans to leave Burtonwood and are committed to the long term provision of GP services within Burtonwood and would also consider new premises for this purpose. PLMC also stated they would actually welcome any increase in registered population if patients choose to register with PLMC. The branch surgery of PLMC is around half a mile away from KP and can be walked to from within the village.

The main surgery at VR is 2.6 miles from KP. However, there are no direct bus routes from Burtonwood to Earlestown. As well as PLMC being an alternative there are GP Practices based in Warrington as follows:

- Westbrook 2.9 miles away
- Chapelford 3.5 miles away
- Great Sankey 4.4 miles away
- Penketh 4.4 miles away

Whilst in miles this may not appear to be a great distance there are no direct bus routes to these sites.

Prior to the Covid pandemic KP was open on a Monday from 8am to 5.30pm and 8am to 12pm Tuesday, Wednesday, Thursday and Friday. However, the site has not been accessible since before March 2020 due to, in part, to the state of the facility but more importantly the ability to staff the site safely.

Branch surgeries are not intended to be full time alternative sites to a main surgery, they usually provide access at limited times and these are often not the full range of services available at a main branch. The contract held by the GPs reflects this level of provision and does not stipulate full time services should be delivered from a branch surgery.

Patients do have access to on-line consultations and video consultations along with face to face at VR. There are also out reach services for those patients that are housebound, including home visits by the practice or the Acute Visiting Car that covers all patients registered with St Helens GPs.

3. Main Body

The Doctors from VR have submitted an application to permanently close the branch surgery based at Kinnock Park, Burtonwood. The application can be found at Appendix 1. Along with this a detailed business case has been submitted. The full business case can be read at Appendix 2.

The business case details why the practice wish to close the branch with details of actions taken and details of the engagement that has taken place.

In summary the reasons are as follows:

- There are currently 8607 patients registered at VR with 1332 residing in Burtonwood. It has become clear that services can not be provided safely across 2 sites for this number of patients given workforce and recruitment issues described below.
- 2. Recruitment and retention of GPs is an issue (locally and nationally) and has been a particular problem for St Helens GP practices.
- 3. Recruitment and retention of all staff groups working in General Practice is an issue, in particular St Helens has struggled to recruit practice nurses.
- 4. Operating across two sites is time consuming and difficult to staff safely.
- 5. VR is a training practice and supervision is required for trainee doctors, splitting the workforce across 2 sites would make this impossible and would put at risk the ability of the practice to continue to train doctors.
- 6. Lone working is an issue with the branch site.
- 7. Services from one site have been provided successfully for some time now without any formal complaints being made to the practice.

The registered patients residing in Burtonwood represent 15% of the total registered population. Since the KP site has not been available a further 224 Burtonwood residents have registered with VR but only 4 patients have chosen to register with another local GP and 6 patients have de-registered as they moved out of the area.

It can be seen in the Business Case that a number of services have always been provided only from VR, even when KP was open. These include Minor Surgery, Maternity Services, Physiotherapy and Mental Health Services. For housebound patients services including home visits, Acute Visiting Service and the Frailty Team will continue to support these patient groups.

One of the major issues is recruitment and retention of both clinical staff and administrative staff. By only having one site staff can be utilised more effectively and issues such as emergency leave or sickness would not impact on patients in the same way as there would be the ability to share appointments between staff at short notice.

Engagement with Patients

Following initial discussions with VR an engagement plan was developed. This detailed all the relevant stakeholders that needed to be contacted and the most appropriate way to do this. The pre-engagement plan can be seen at Appendix 4. VR, with support from Place Primary Care team St Helens Place, produced a letter and patient questionnaire that was circulated to all households with patients registered at VR (including all Newton-Le-Willows and Earlestown patients). VR arranged two drop-in sessions for patients to engage on the proposal to permanently close KP. The first session was held on 12 December 2022 at Burtonwood Centre and the second in Newton-Le-Willows on the 19 December 2022. The Burtonwood session was attended by Partners and Management staff from the Practice and was well attended and those in attendance were able to listen to the reasons for the proposal. The second session was only attended by the Chairs of

the Burtonwood resident group but this enabled discussion around possible changes the practice could make to support patient access.

Initial responses to the questionnaire stated that one of the questions relating to accessing KP was inappropriate as it had been closed for some time so the doctors listened to those concerns and addressed them, by issuing a second questionnaire that reworded this question. The second questionnaire was provided via Survey Monkey and also circulated in paper format with the support of local residents group leads within Burtonwood to the Pharmacy, Community Centres and village shops.

Following circulation of the survey 102 surveys were completed and submitted. From this 27 Females and 21 males agreed with the proposal whilst 21 females and 16 males did not agree with the proposal. In response to the question about what patients would do if the practice closed 79 stated they would remain registered and continue to travel to VR, 8 stated they would register elsewhere and 13 didn't respond.

In responses from patients that stated they had a long term illness or disability 4 stated they would remain registered with VR, 2 would register elsewhere and 1 didn't respond.

More details relating to responses to the survey can be seen at Appendix 3 within the Equality Assessment document.

As part of the face to face engagement sessions a number of issues were raised to the Doctors from VR which have been taken on board and changes have been implemented to help alleviate the concerns. Table 2 within the Business Case (Appendix 2) details some of these issues and the changes that have been implemented to support patients.

Due to the wider issues of access to health care services for Burtonwood residents Warrington Place commissioned a wider reaching consultation that wasn't just about GP services. Health Integration Partners commenced with consulting Burtonwood residents in March 2023. The aim of this work was to gain a detailed understanding of the issues experienced by residents of Burtonwood accessing Healthcare services, not just GP services. The results of this process will be reported separately to Warrington Place.

Warrington Place has also taken the closure proposal to their Primary Care Group (PCG) meeting to approve supporting the closure. The Mid Mersey Local Medical Committee sit on that group and supported the closure. Warrington Place PCG approved supporting the closure on the 14 September 2023, subject to formal approval at the St Helens Place public meeting.

As part of a wider engagement process letters detailing the proposal and copies of the frequently asked questions were sent to the local MP, all local councillors, Healthwatch, PALS, the Local Medical Committee and surrounding GP practices. The proposal was also tabled and discussed at the Warrington Oversight and Scrutiny Committee on 26 January 2023.

Following a final decision further engagement with patients is planned to inform them of next steps and also to ensure patients are aware of their right to change GP practice should they wish to and provide advice on what to do to move practice.

Equality Impact Assessment

An Equality Impact Assessment was completed and is included below at Appendix 3. This identifies some areas the practice should consider to ensure patients continue to be able to access GP primary care services appropriately. This includes highlighting issues for those with disabilities and the older population. The practice business case already addresses some of these issues but as part of the follow up to this application St Helens Place will monitor VR to ensure any changes of practice are implemented and monitored.

The Equality Impact Assessment highlights that a number of responses to the survey mentioned patients walking to the KP site and that convenience was a key issue for patients. VR have articulated through the business case and the face-to-face engagement that this is a decision based on safe staffing levels and to ensure the future of the practice for all 8607 patients. Primary Care services will still be provided as they are currently and patients can access them as they have been doing. There is also alternative provision within Burtonwood should patients choose to register at PL. It is not realistic to assume that a GP practice is in walking distance of every patient, however, for those that this is an important consideration, Patterdale Lodge branch surgery in Burtonwood provides this as an alternative option that remains in walking distance. As such it would appear that this would not be a reason to prevent closure of the KP site.

If the closure is not approved the practice has informed the St Helens Place Team this would put significant pressure on the practice to maintain high quality, safe services and would also put at risk their ability to continue as a training practice, which has long term implications for the recruitment of doctors both locally and regionally.

Options for consideration

Option	Implications
Kinnock Park Remains Open	The patients registered at Vista Road Surgery would maintain access to a local facility without having to change GP surgery. The building needs significant refurbishment. The Drs of Vista Road Surgery have submitted a business case wishing to close and so by default do not wish to maintain this building. There is a risk the Drs may walk away from the whole contract putting 8607 patients at risk. Vista Road Surgery is a teaching practice and would be unable to continue with this due to the over stretching of GPs to provide
T	clinical supervision.
The closure of the Kinnock Park facility is agreed	There is an alternative GP provider with a facility in Burtonwood if patients choose to move practice. Vista Road Surgery GPs can ensure sufficient access is available at the main surgery site. A teaching practice is maintained to develop
	the GP workforce.

A full and detailed communications plan can be put in to place to ensure patients know what options are available to them.

Support to move practice can be given if patients choose to move.

The practice can implement changes to improve service provision and support patients.

Patients registered with Vista Road Surgery could move to another GP to maintain access to a service within Burtonwood.

Once a final decision has been made in relation to the proposed branch closure all patients and relevant stakeholders will need to be informed of the outcome. To ensure this reached the intended stakeholders, as with the pre-engagement, a post decision engagement plan has been developed and can be seen at Appendix 5.

The St Helens Place Primary Care Team will attend Warrington Scrutiny Committee on 25th January to inform them of the decision and next steps.

4. Recommendations

The Primary Care Group is recommended to:

- 1) Note the contents of this report.
- 2) Approve the application from VR for the permanent closure of their Kinnock Park Branch Surgery in Burtonwood, which is supported by both St Helens and Warrington Primary Care Groups on the basis that quality services cannot be sustained from both sites given the workforce challenges faced in primary care currently, and also accepting that there is a suitable alternative presence in the Burtonwood Village for any patients who feel that they need access to a more local site.

Appendix 1

Application Notice to Close Branch Premises

28.4.2023

Dear Commissioner

Application to Close Branch Premises

Please provide the information below to the Commissioner no less than 28 days before the

requested contract

Affix practice Vista Road Surgery

Drs Hussain, Crompton, Booth & Rogers
Vista Road
Newton-le-Willows
WA129ED
Tel: 01925221457

Details of branch surgery

address

Burtonwood Branch

Surgery Kinnock Park Burtonwood

 Do you have premises approval to dispense from the branch surgery?
 If yes, how many patients No

do

NIA

you currently dispense to?

2. Do you have premises approval to dispense from any other premises? If no, do you intend to give three months' notice of ceasing to dispense as required by Paragraph I O of Schedule 6 of the National Health Service (Phannaceutical and Local Pharmaceutical

No

No

3. How have you involved patients regarding this proposal?

Patient survey and questionnaire was sent to all our registered patients on 7.12.22 We also held 2 patient forums in both Burton wood Village and in Newton Le Willows on separate dates this identified an issue with the first survey' that was sent out, so it was modified and the second survey ran from 23rd December 2022 to 31st January 23, this was sent in both paper form and via survey monkey, we also worked with local residents group lead to share the patient survey and put in local pharmacy and community centre and shops in the village •-

(Please see attached business case)

 How will you be communicating the actual change to patients, ensuring that patient choice is provided

Patient letter and on our website include patient choice, notices will also be displayed to Vista Road reception area

Text message will be sent to all patients with a

throughout, should the Commissioner approve this application?

mobile number

Plan to meet with lead of residents' group to help us inform patients of their patient choice and contact with at risk groups will be targeted through residents meeting.

Contact will also be made with our patients in at risk groups directly

(Please see attached business case)

- 5. Please provide a summary of the patient involvement feedback and confirm that you will supply evidence of this consultation should it be requested:
- 6. Please provide as much detail as possible about how this proposed closure will impact on your current registered patients, including:
 - access to the main surgery site i.e. public transport, ease of access;

 capacity at main surgery

site;

booking appointments;

Patient questionnaires and results as appendix to report.

Vista road is approx. 2.6 miles away from the Branch surgery, while there is no direct bus route currently, there is a bookable community bus that can bring patients to appointments at Vista Road.

 Appointment capacity has been increased at the main site and w e have added later appointments to accommodate school children and working people.

1

 additional and enhanced

services;

- · opening hours;
- · extended hours; and
- dispensing services (if applicable)

- PATCHS has been introduced for online access and administration requests.
- Practice website is available to request prescriptions online.
- Prescription ordering can be set up at nearest pharmacy or online pharmacy of patient's choice to order on their behalf and deliver if required_
- Patient self-help advice and signposting available on practice website
- 98.5 % of our patients are on EPS prescriptions so patients don't have to travel to Vista Road to order and collect their prescriptions, they can go straight to their local pharmacy to order and collect.
- AVS visits are provided for those that require an urgent visit.
- The Doctors will provide home visits when clinically necessary
- Frailty nursing team provide visits for those in need.
 Enhanced access is available, and patients can be book into appointments directly by reception and given options to be seen. face to face or receive telephone advice

Out of hours is available outside surgery hours.

- An enquiry has been sent to St Helens council regarding planning permission to extend the current car park at Vista Road to accommodate more patient vehicles.
- We have made changes to our telephone line system to help with capacity and reduce waiting times for patients.
- Nominated staff can help patients register online for patient services and show they how to order online, book appointments, demonstrate how, to

PATCHS and practice website

(Please see attached business)

Road to accommodate more patient vehicles.

 We have made changes to our telephone line system to help with capacity and reduce waiting times for patients.

As soon as possible

- 7. From which date do you wish
 - . the branch closure to take effect?

Signed by

Where an application to close premises 1s granted by the commissioner, the contractor shall remain fully responsible for cessation or assignment of the lease for any rented premises and any disposal of owner-occupied premises. In both cases, payments under the premises directions will cease from the day of closure.

Please note that this application does not impose any obligation on the Commissioner to agree to this application.

Appendix 2

Proposed Closure of Kinnock Park surgery Burtonwood – Business case from GP practice

Introduction/Background

Kinnock Park surgery is a branch surgery of Vista Road Surgery based in Burtonwood Village. The main site, Vista Road Surgery, is 2.6 miles away and is currently a training practice.

Kinnock Park is currently rented by the partners from two retired Doctors who were previously partners at Vista Road Surgery.

Prior to the COVID 19 pandemic the opening hours at Kinnock Park were: Monday 8-12 & 2-5.30pm Tuesday 8-12 Wednesday 8-12 Thursday 8-12 Friday 8-12

However, these hours have not operated since March 2020 and the branch site has not reopened since the closure due to the pandemic and building issues.

We currently have a list size of 8607 patients, with 1332 of these patients being resident in Burtonwood near to Kinnock Park branch surgery.

We are proposing to permanently close Kinnock Park branch site as the Doctors are concerned with the difficulties recruiting GPs and the difficulties covering two sites which increase the stress the doctors find themselves working under due to the logistics of running a branch surgery.

We would wish to maintain registration of all those patients choosing to remain registered and travel to the Vista Road site. During the period since the branch surgery closed patients have continued to access services via Vista Road and there has been little sign of patients registering elsewhere. However there are alternative practices based in Burtonwood and Warrington should the patient choose to register at another practice.

The closure of Kinnock Park would enable us to be more efficient, provide safe staffing levels, continuity of care to patients and ensure staff safety by preventing the need for lone working and also to continue to provide trainee supervision at Vista Road.

Main Body

The branch surgery was closed at the start of the covid pandemic, and all services were provided from Vista Road Surgery, this was to ensure adequate staffing levels during the pandemic and to keep our patients safe, as we could not adhere to government guidance and guidelines of safe social distancing with a one-way system due to the size and layout of Kinnock Park surgery.

During the pandemic all our patients requiring a face-to-face appointment were seen at the main Vista Road site. Minor Surgery, physiotherapy, Maternity and Mental Health Services have always been provided from the main site, so this was not impacted during the pandemic. Home visits have always continued and will continue either via the practice, the Acute Visiting Service or the Frailty Team.

All patients were set up on EPS prescriptions, a community bus was introduced for those patients needing to be seen could be brought to Vista Road Surgery by calling a designated telephone number and booking a pickup time. To enable further access to services E- consult was introduced along with Footfall website to allow all our patient's digital access. Home visits are available and provided by either Vista Road Surgery Doctors, AVS or the Frailty Nurses.

The pandemic showed that as a practice we could still provide services and continuity to all our registered patients from the main site and allowed us to be more efficient by operating from one site, as Vista Road is a training practice the Doctors need to be on site to supervise the trainee doctors.

During this time, we did not receive any written or verbal complaints regarding the Kinnock Park site being unavailable. This would suggest that patients were able to access services when they required them.

By providing services solely from Vista Road, we can ensure safe staffing levels, any emergency leave or sickness would not impact patients as appointments would be shared between clinicians at the main site to prevent the need to cancel and or delay any appointments. Nationally there are difficulties recruiting to general practice as the number of GPs has reduced and recruitment to all roles is providing to be a challenge.

Kinnock Park is a small practice with 2 consultation rooms, one is a GP consultation room and the other a practice nurse room.

In 2018 CQC inspected Kinnock Park in their recommendation was to have a sluice room which would require the building to be extended and would require automatic doors and ramp for disabled access to be installed.

A key area of concern is lone working at Kinnock Park due to staff recruitment and retention meaning fewer staff were available to cover both sites effectively.

Since the need to close Kinnock Park in 2020 we have registered a further 224 patients living in Burtonwood. This compares favourably to those patients who have left our practice list since which consists of 4 patients who have registered with another GP and 6 patients who have left because they have moved out of the area. We continue to accept new patients who have chosen to register with us who have moved into Burtonwood Village.

We held two patient engagement forums in Both Burtonwood Village on 12th December 2022 and Newton Le-Willows on 19th December 2022.

We listened to patients concerns and implemented the changes that were highlighted by the patients, the main issues raised included getting to Vista Road, getting through on the telephone and booking appointments both via telephone and face to face appointments

The changes we were able to implement are shown below in Table 1.

A survey was circulated and over 1300 questionnaires were sent to all Burtonwood patients. The questionnaire brought in 102 responses (patient survey results are embedded below) along with the list of free text comments made.



Data_All_230202 Burtonwood.docx



Data_All_230202 parr 2.docx

We have reviewed the patient survey results which also highlighted the concerns in lack of direct bus services, parking at Vista Road, telephone lines, call waiting and booking appointments and have implemented changes /improvements as shown below in Table 1.

As well as the information in Table 1 the survey also captured whether patients agree with the proposal or not. We received 102 completed surveys these were found to be 50 female, 38 male, 12 not disclosed or prefer not to say. Of these 27 females and 21 males agreed with the proposal while 21 females and 16 males did not agree with the proposal. This equates to 37% of respondents not agreeing, this 37% equates to 2.8% of the population registered with a Burtonwood postcode.

Patients were asked what they would do if the branch closed, 13 respondents didn't answer, 8 would register at an alternative practice and 79 stated they would travel to Vista Road Surgery.

Patients with disabilities and long term illnesses responded. Those 4 patients with a long term illness stated they would travel to Vista Road Surgery, 2 would register elsewhere and 1 respondent didn't answer. Those with a physical impairment responded with 11 stating they

would travel to Vista Road Surgery, 1 would register elsewhere and 2 didn't respond. For those who cannot attend Vista Road Surgery there are alternatives with home visits or there is another practice in Burtonwood which is actively registered patients.

Table 1

Issue	Changes	Challenges
Appointments	implemented Appointments have been increased at Vista Road to accommodate Burtonwood patients this	
	includes opening more face-to-face appointments.	
	Telephone appointments are available and have been increased.	
	Video appointments are available for those unable to come in.	
	Enhanced access appointments are available.	
	Out of hours appointments are available	
	Later appointment times have been added to accommodate working patients and schoolchildren.	
	Pharmacy referral service for minor ailments and OTC requests.	
	Respiratory hub appointments available	
Telephone Lines	The patient survey showed that although this impact, we have made	Patients had separate telephone number for Kinnock Park
	changes to our call waiting times, and we have enquired about getting divert put on to	
	divert those patients who	

	have an administrative question to be diverted to the Secretary so they don't have to wait in appointment queue, this will then reduce the number of patients waiting in queue. Call back feature hopefully to be introduced in 2024. Designated prescription clerk with EXT number for any prescription queries.	
Ring back	Clinicians have increased	
appointments	ring back attempts from 2 to 3	
Parking	An enquiry has been made to St Helens council regarding the requirement for planning permission to extend car park to include more disabled bays. Should planning permission be denied, the clinicians would look at staggering their clinic times to reduce patients coming at same time this will enable spaces to be available	Should planning permission be denied, parking could become an issue Cost to extend the car park
Travelling to vista Road	All services provided from one site	No current direct bus route/lack of public transport.
	Disabled access compliant Continuity of Doctors and other clinicians.	Practice is willing to work with Warrington council to help improve bus services

Table 2 below provides an analysis of the benefits and negatives of closure of Kinnock Park.

Table 2

Issue	Benefits	Negatives
Lone working	All staff based at Vista Road	- 3
3	Surgery	
Disabled Access	Vista Road is all on ground	
	level, has automatic doors,	
	designated disabled bays,	
	disabled toilets, disabled	
	accessible consultation rooms	
Home Visits	Home visits will continue to be	
	provided to housebound	
	patients, or where clinically	
Drescriptions	necessary	Deticate as leaves chie to well
Prescriptions	All prescriptions can be	Patients no longer able to walk
	requested via PATCHS, practice website, telephone,	to Kinnock Park to order, post in box directly or hand to
	post or via local pharmacy	reception.
Training practice	Doctors can be on one site to	reception:
Training practice	assist/supervise trainee	
	doctors and med students.	
	Practice nurses can be on site	
	to supervise student nurses.	
Wound care/dressings	Always been performed in	
	community not at our practices	
Hospital referrals to		Always been rejected by
Warrington Hospital		Warrington Hospital as practice
		is on boundary with St Helens.
St Helens District Nurses		Will not visit Burtonwood
		registered patients.
Phlebotomy	Urgent blood request clinics	
	now done at Vista Road by	
	GPA, to reduce waiting times	
	and prevent patients having to book into community	
	clinics/hospitals	
Maternity Services	Always been delivered from	
materinty our vides	Vista Road, due to lack of	
	space and no fee clinical room,	
	only 1 GP and 1 PN room at	
	Kinnock Park surgery.	
Mental Health Practitioner	Always been delivered from	
	Vista Road, due to lack of	
	consultation rooms	
In House Physiotherapy	Always been delivered from	
	Vista Road, due to lack of	
	consultation rooms	

The survey results would appear to show patients support the closure. However, the amendments to service provision detailed above will continue to provide the support to patients accessing services.

Appendix 3

Equality Analysis Report Final Vista Road Surgery v1

Start Date:	29 March 2021	
Equality and Inclusion Service Signature and Date:	Andy Woods	21.2.2023
CCG Officer Signature and Date:	Kirk Benyon	22.2.2023
Finish Date:		
Senior Manager Sign Off Signature and Date		
Committee Date:		

1. Details of service / function:

Guidance Notes: Clearly identify the function & give details of relevant service provision and or commissioning milestones (review, specification change, consultation, procurement) and timescales.

Vista Road Surgery currently has a branch surgery, Burtonwood Village Surgery located at Kinnock Park, Burtonwood. Burtonwood is a village located in the Borough of Warrington. Due to the proximity to St Helens the GP services within the village are both branch surgeries attached to two St Helens GP surgeries.

The Doctors (Drs) from Vista Road Surgery are concerned at present with difficulties recruiting GPs and the difficulties covering two sites which increase the stress the Drs find themselves working under. The branch surgery building is currently rented by the Drs of Vista Road Surgery. In 2018 the Care Quality Commission visited the site and stated a sluice room would be required, it would be necessary to extend the building to enable this. Disabled access is also required needing automatic doors and a ramp.

The practice currently has approximately 1350 registered patients' resident in the Burtonwood area (those with a Burtonwood Post Code), these are divided as follows:

- Patients aged 66 and over 370
- Patients aged 19 65 763
- Patients aged 0 -18 217
- Patients on the Learning Disability Register 2
- Mental Health Register 4

English Not First Language – 1

The main surgery at Vista Road is 2.6 miles away from the branch. Due to the geography of Burtonwood the nearest alternative practice is also a branch surgery of a St Helen's practice, Patterdale Lodge Medical Centre (0.17 miles away). However, there are alternative practices based in Warrington as follows:

- Westbrook 2.9 miles
- Chapelford 3.5 miles
- Great Sankey 4.4 miles
- Penketh 4.4 miles

Vista Road Surgery has proposed to close the Burtonwood Surgery site but would wish to maintain registration of all patients choosing to remain registered and travel to the Vista Road site. This proposal has gone out to engagement with patients and the results and feedback will be analysed and reported back to St Helens Place and will be incorporated into a post engagement Equality Impact Assessment report from an equality perspective. The rationale for the Burtonwood Surgery closure is the current difficulties recruiting to posts and maintaining services across two sites. The issues with the compliance with regulations for the building also make running this site difficult.

Wider considerations and background

Burtonwood at present is only serviced by two branch services of two St Helen's practices. A major issue relating to this is access to Community services and Secondary Care Services. As patients are registered with St Helen's practices all service provision is from a St Helen's perspective. This can and does cause some issues with accessing services and referral into services.

In order to facilitate this and secure services it is necessary to look at this from a bigger perspective than an individual practice and look at ways of moving Primary Care Services to ensure provision meets patient need whilst transforming and ensuring resilience for practices.

During the COVID pandemic General Practice has adapted to provide new ways of accessing services such as video consultation, telephone consultation etc, these services would still be available to registered patients.

What is the **legitimate aim** of the service change / redesign

Apart from the building issues the current partners wish to reduce to one site due to the logistics of running a branch surgery. Prior to COVID the branch surgery operated at the following times:

Monday 8am - 5.30pm Tuesday 8-12 Wednesday 8-12 Thursday 8-12

Friday 8-12

No services have been provided from Kinnock Park since March 2020

- Commissioning efficient effective and economic GP services
- Bigger picture of moving Primary Care Services to meet patient need whilst transforming and ensuring resilience in the system
- NHS Long term Plan
- Five year forward view GP services.

2. Change to service

It is proposed the Burtonwood Surgery branch site will close; patients that use the site will have access to the main surgery at Vista Road 2.6 miles away as they do currently. As detailed in section 1 above there are a number of alternative GP practices within the Warrington area where patients could register should they choose to move practice. The distances are based on ability to drive to the alternative.

The biggest change to patients that currently use Burtonwood Surgery will be travel, ability to pay for transport and convenience. During the COVID pandemic a number of alternative ways of working (video consultation, telephone consultation) have been introduced which the Drs of Vista Road Surgery are keen to continue to enable patients to access services with them. Housebound patients will have access to home visits either via the practice or the Acute Visiting Service.

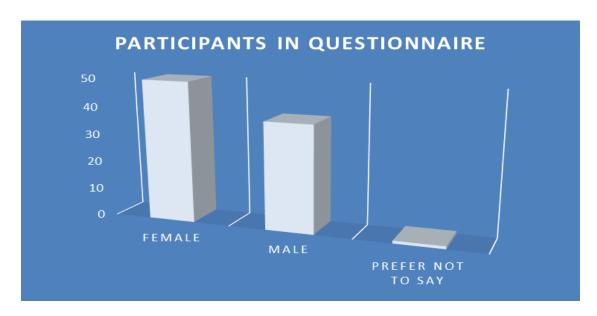
It is also of paramount importance that during the transition or change patients do not 'slip through the net' and that all patients (including/especially vulnerable) patients are offered choice and secure alternative GP provision if they choose to.

3. Results of questionnaire consultation.

The practice has just over 1300 patients and the questionnaire brought in 102 participants. **N.B not all participants answered every question.** The data below represents 'who' participated and then their views linked to their protected characteristics. The section below 'what do people think' also lists some of the more typical comments. At Appendix C – all the comments made by participants are listed. Its worth taking a moment to look through these and see the detail of some of the comments and remarks.

Who participated in the questionnaire:

Profile by sex:

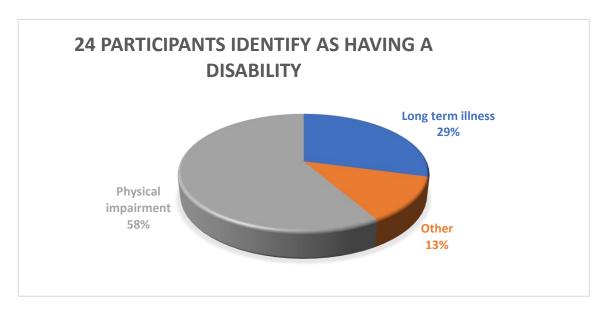


Female 50 Male 38 Prefer not to say 1

12 people did not disclose any information.

Whilst more females than male participated there is enough of a sample of both sexes to ensure 'female and male' views are expressed.

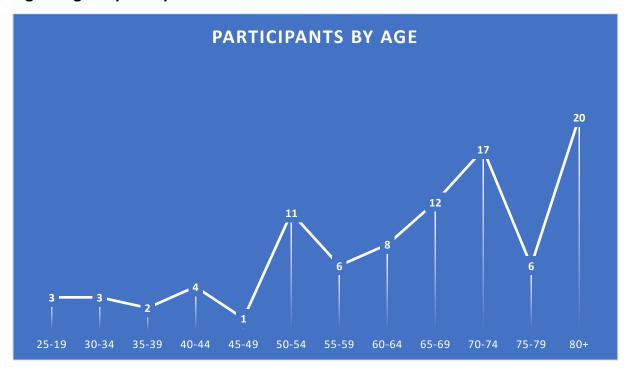
Profile by Disability



24 people (almost a $\frac{1}{4}$ of participants) identified has having a disability or limiting lifelong illness, this compares with

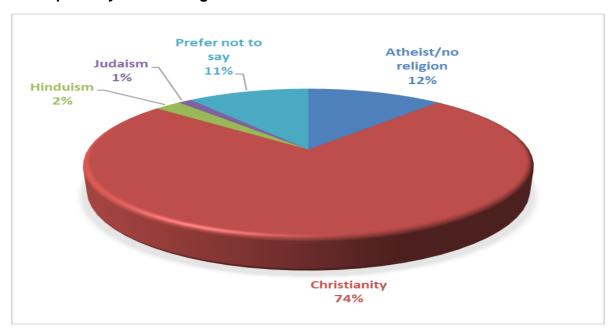
- 2 Patients on the Learning Disability Register
- 4 Patients on Mental Health Register

Age range of participants



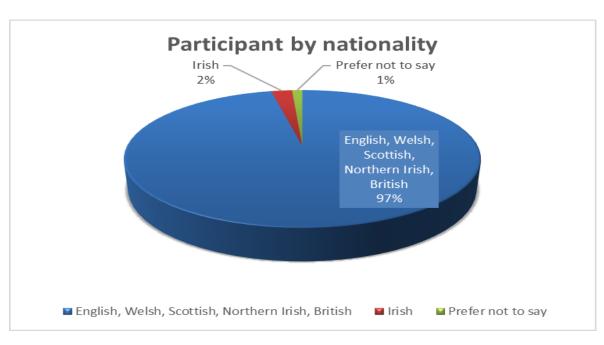
Over 50 year olds presented as the main demographic, with 70+ being the largest group. When looking at the surgeries demographic the largest group is 19-65 (with 763 patients) and the over 65's being the second largest group. (370 patients)

Participants by belief & religion



Atheist/no religion 10, Christianity 64, Hinduism 2, Judaism 1, Prefer not to say 9. Christianity was the largest group, with Atheism/no religion the second largest group.

Participants by Nationality



English, Welsh, Scottish, Northern Irish, British-86 people, Irish-2 people, Prefer not to say-1 person.

The nationality data did not show up any black or Asian minorities as participating in the questionnaire.

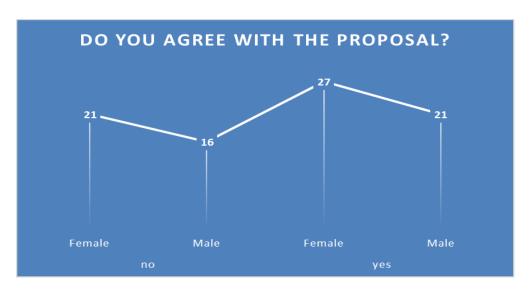
According to the latest 2021 census, the population in St. Helens is predominantly white (96.5%), with non-white minorities representing the remaining 3.5% of the population. Asian people were the largest minority group in St. Helens accounting for 1.4% of the population.

What did people think?

Whilst the questionnaire asked many questions, three questions were of particular importance:

- did people agree with the proposal?
- what are the implications for travel?
- would people use the Vista Rd surgery or want to go elsewhere?

Do you agree with the proposal?



Participants where slightly in favour of the proposal but with a significant dissent.

Typical comments¹:

- "Not good for people that live in Burtonwood them having to travel further than they usually have to, elderly and young should have the service near them, they need to keep this open for residents there, it's hard to find parking at vista Road as it's not big enough for everyone and certainly not with more patient's bigger car park needed and more doctors quicker appointments for all"
- "We feel we are treated like 2nd class citizens in Burtonwood. There are more than enough people in the village to warrant a local surgery. Why not use Church Hall for all practices? just a suggestion"
- "I understand there is more need for gp services but I don't understand why the Burtonwood surgery couldn't be open for a couple of days a week to help residents

¹ N.B. Comments are lifted directly from the questionnaire and are not edited for grammar/spelling/syntax.

who have difficulty getting to vista road site because public transport to get to vista road isn't a direct service. Also the car parking situation at vista road is very difficult, even getting an appointment is difficult".

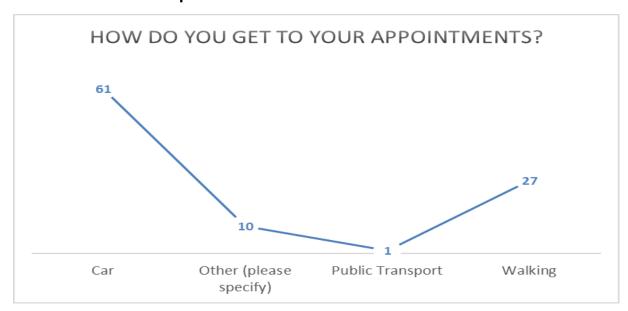
There were concerns expressed around the quality of the service once the merger took place.

- "Whilst we understand in principle the plans, we would welcome more information in terms of whether there is going to be an increase in receptionists answering calls."
- "I would like to be able to reach the service without spending ages on the phone (more phones) perhaps"
- "The proposed closure is certainly not convenient for patients like myself who don't drive and cannot rely on a very limited public transport (2 hourly) therefore have to request lifts. I have always been happy with the service provided, however I now tend not to make contact because of the difficulties getting through to the surgery and when you do it feels like you have to go through a telephone contact before any FaceTime face appointment is offered adding additional time before any necessary treatment is prescribed, I have missed a couple of telephone consultations because I didn't get to my phone before the caller rang off a second call 5 minutes later would be helpful"

In addition to comments on the proposal, anger was raised at some of the questions asking about frequency of visits to Burtonwood site within the questionnaire:

- "Absolutely disgusted by this idea, please explain how anyone could have attended the branch surgery at Burtonwood when it has been closed for 2.5 years, leaving those of us living in Burtonwood no other choice but to attend the Vista road site".
- Questions 3 and 6 are invalid as Burtonwood site could not be visited in the last 12 months due to continued closure of the branch surgeries since Covid-19
- "This survey states the last 12 months however the Burtonwood surgery has been closed for over 2 years so how can you complete a form which has got incorrect information!"
- "seems a Faitaccompli, in which case i will move practice"

What are the travel implications?



Whilst the majority take their cars, there is a significant number that walks to appointments (second largest group).

Those that have specified 'other' have listed 'lift from family/friends' as their top remark, followed by cycling.

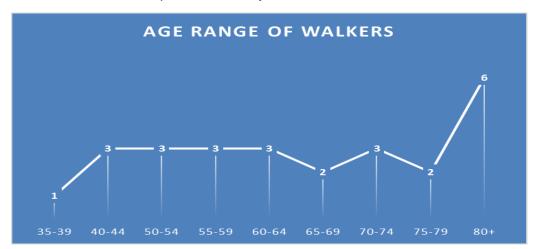
Concern was shown, in that, those who walked would have to now pay for travel, either by their car's fuel or by public transport/ taxi.

Typical comments on the issue of travel:

- "not sure there is anything good about the closure of Burtonwood surgery. There are vulnerable people who would find it difficult to travel to Vista Road"
- "I live on my own and at the moment can still drive. My concern is that public transport goes nowhere near the main surgery and is limited to 1 every hour, sometimes 2"
- "It costs a fortune in a taxi to get to Vista Road theres no reason to close Burtonwood"
- "I think the elderly people of Burtonwood need their own surgery, as many of them dont have their own transport and the bus service is not always available for the appointment time".
- "when I visit Vista Road i find there are no parking spaces"
- "At present I am reasonably fit at 77 yrs of age and can drive to wherever I need to go but as I get older I would prefer to have access to a surgery closer to my home. I think this is very true for the many older residents of Burtonwood who do not have transport means. Also given the bus services to Burtonwood are few and far between I think many of them would struggle to attend appointments in Newton-le-Willows"
- want a surgery i can walk too rather than take bus or taxi, have a Doctor at B/WOOD even for 1/2 day basis.

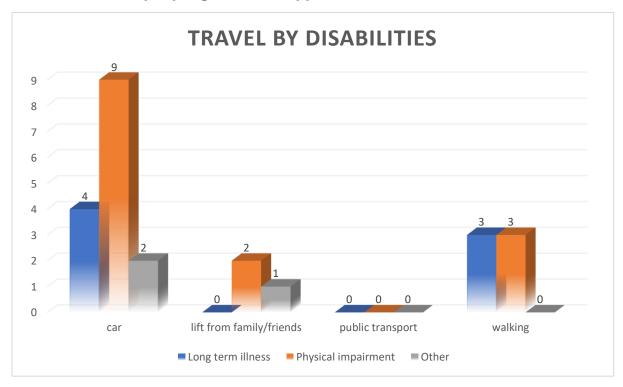
Who walks?

12 females, 13 males, I - prefer not to say



Older and very old are those walking to the clinic. No one under 35 has identified as walking. This may reflect the fact that car ownership reduces for older people on fixed income as the cost becomes too burdensome.

How do disabled people get to their appointments?



Participants that have identified as having a disability do not use public transport and mainly use a car. The second preferred mode of travel is walking. It's clear from the comments that public transport is poor and doesn't service the community very well.

- "i rely on my daughter to pick me up to get to the surgery cant rely on buses, one long walk from market square and 2 hour bus wait I'm 86 and registered disabled"
- "As I am disabled I have to make transport arrangements to access Vista Road. We have not been able to visit surgery as unable to get face to face GP appointment".
- Burtonwood is growing community, the bus service is every 2 hours with the bus stopping in earlestown and the surgery is 10 minute walk away. when the surgery was in market street at least we had buses to get us there.
- "There is no direct bus route to the surgery and for patients without transport it is to far
 to walk. The letter says home visits would remain available to residents in the
 Burtonwood area. Will there be a direct phoneline dedicated to patients from
 Burtonwood in need of a home visit?"

Would people use the Vista Rd surgery or want to go elsewhere?

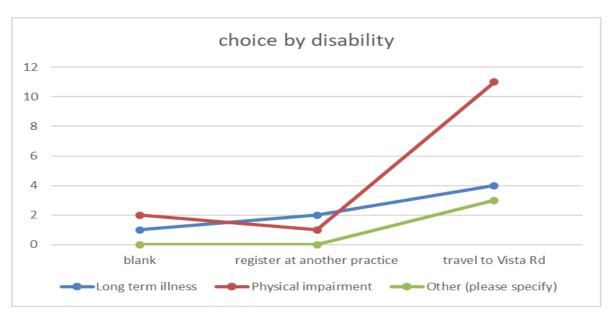


The majority of patients would use Vista Road surgery. Some would look to change practice. There were also a number of people that did not respond to this question.



	blank	female	male	prefer not to sa	ay	total
	13					13
Register at another practice		5	2	1		8
Travel to the main surgery (Vista Road)		43	31			79

Both men and women largely elect to use Vista Rd surgery.



	blank	register at another practice	travel to Vista Rd
Long term illness	1	2	4
Physical impairment	2	1	11
Other (please specify)	0	0	3

The majority of people with disabilities will travel to Vista Rd.

Typical general comments made by participants.

- "we do get a good response from Drs when we get to speak to them"
- "I have complete trust in the doctors and staff. I don't want to leave the Vista Road"

- "I would like to be able to reach the service without spending ages on the phone (more phones) perhaps"
- "Reinstate online booking of face to face appointments and allow access to test results on line"
- "Made more face to face appointments available made the time scale of 8-8.30 longer to be able to access an appointment"
- "More people answering phone at 8 am so we wouldn't be cut off after being told 5 in queue"
- "Its almost impossible to get an evening appointment or on specific days, therefore the ability to book appointments on line via patients access, or the option of completing an on line problem/symptom advice form for quick treatment advice or quick prescribed treatment without having to access the surgery."
- "Issues regarding the availability of getting appointments on the day or within a few days or ringing Vista Road surgery . More availability of face to face appointments with drs."

4. Barriers relevant to the protected characteristics

Closing a service can be a blow for local people as its often viewed as a removal of a 'common good' which adds to the feeling of an area in decline. Participants in the questionnaire (roughly 10% of the patient group) did agree with the proposal to move the services to Vista Rd – albeit by a slim majority, despite reservations about a beloved local service disappearing.

The comments show that participant understood the 'business need' for this change and that access to primary care would still be provided.

The surprising number coming out of the questionnaire is the reliance on 'car' to get to appointments, with the second mode of transport being 'walking'. This means in effect, that changing services to Vista Rd (and beyond a typical walking distance) means that we are asking patients who are having face to face appointments to use cars. Participants have roundly condemned the public transport system and being unfit for purpose.

The majority of 'walkers' are older and very old people, who are statistically less likely to own a car due to either running costs on a fixed income or feeling unsafe to drive. This group, are faced with three options:

- Ask a friend or family for a lift (who will have to wait in order to take them home again)
- Use a taxi (which may be too costly)
- Ask for a home visit.

Other striking features coming out of the consultation was:

- Frustration at the difficulty of making an appointment.
- Frustration at not having face to face appointments.

Appointments:

Frustration has been expressed over the method of making appointments via the 8am-8.30am call – not being able to get through has led to some saying that they have 'given up' and stopped calling – thus putting themselves outside of primary care. In addition, some patients

with learning difficulties or poor mental health may find it extremely difficult to be so constrained. GPs generally need to assess this provision; is this the only way it can be done? In addition to frustration in making appointments, older people and people with disabilities express concern over 'incoming calls from Dr', in that, patients with mobility problems or reliant on carers are 'missing the call' - finding the phone stops ringing after only a handful of rings. GPs need to consider the patient's need (details can be put on file) as to how long to ring or to ring back again.

Face to face

During the Covid pandemic, services changed to protect patients (keeping them away from waiting rooms), patients understanding the risk 'made do' with telephone appointments. Whilst many patients felt comfortable with telephone and video appointments many have not and express the wish to return to face to face appointments – as a choice, due to:.

- Loss of connection (physical interaction with a Dr bed side manner)
- Unable to express illness (need an examination)
- Social Connection (getting out of the house)
- Difficulty with telephones

Older patients particularly request face to face services. Commissioners and GPs need to give careful consideration as to how this can be facilitated. As older people struggle more and more to access the service and link with GPs, then the service starts to stray in to areas of 'indirect discrimination', where a *rule*, *provision* or *criteria* disadvantages one particular protected characteristic compared to another. GPs have to consider the needs and wishes of all patients when designing and delivering a service.

Differential Matrix

Protected Characteri stic	Issue	Remedy/Mitigation
Age	Older people have identified that they walk to appointments and will now have to consider. • Asking a friend or family for a lift (who will have to wait in order to take them home again) • Using a taxi (which may be too costly) • Asking for a home visit.	Home visits may be a far more the favoured option. GPs need to consider a dedicated line to make appointments. Local Authority often have 'community transport' that can pick older people up and take them to appointments. Other areas in the ICB have used alternative transport to ensure patients can access their services. Commissioners and GPs to explore this option. St Helens place (former CCG) to link with transport providers to see

	Older people want more face to face appointments. Loss of connection (physical interaction with a Dr). Unable to express illness (need an examination) Social Connection (getting out of the house) Difficulty with telephones	if better arrangements can be made. GPs need to consider how they can make more face to face appointments. GPs need to consider use of technology by older patients (lack of smart phone/Wi-Fi etc) and proficiency in using 'video calls'.
Disability	Concern around travelling to Vista RD site and lack of parking facilities.	Remind patients of 'blue badge scheme' and where to apply. Ensure there are sufficient disabled parking bays.
	Concern around 'ring back appointments' missing calls as they don't ring long enough.	Ensure file details – as well as phone number - give an instruction over ease of answering phone. Cell phone may not be ready at hand/charging and land lines may be in another room.
	Concern around lack of public transport. No disabled person reports using public transport.	St Helens place to link with transport providers to see if better arrangements can be made. Local Authority often have 'community transport' that can pick older people up and take them to appointments.
	Information and communication needs	Provision to make reasonable adjustments Other GP services in the ICB have used alternative transport to ensure patients can access their services. Commissioners and GPs to explore this option. Commissioners ensure that GP services have implemented the Accessible information Standard.

		https://www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/accessibleinfo/
Gender reassignm ent	No participant in questionnaire identified as trans	Ensure access to services remains open for trans and potential trans patients.
Marriage and Civil Partnershi p	No impact	
Pregnancy and maternity	At present there are 3 patients who have a Burtonwood post code and are currently pregnant. However all attend Midwife appointments at Vista Road as the midwife provides services from that location.	Continue maternity services
Race	No black or Asian participants in questionnaire. No information on whether ethnic minority patients have language barriers to making appointments.	St Helens 96% white demographic. Review internal process for including black and Asian patients in service reviews/consultation etc.
Religion and belief	Not Impacted	
Sex (m/f)	Access to services/appointments	GPs to review appointments system.
Sexual orientation	Only 1 person identified as LGB via questionnaire. They did not raise any concerns connected to their protected characteristic.	N/A

5. Does this service go the heart of enabling a protected characteristic to access health and wellbeing services?

Yes – its primary care services.

6. Have you identified any key gaps in service or potential risks that need to be mitigated

Participants have identified areas of concern with service provision:

- 1. Making appointments
- 2. Lack of face to face meetings
- 3. Travel

Risk	Required Action	By Who/ When
Making appointments is a frustrating system of which some patients have started to 'opt out' (i.e., not receive primary care)	Review appointment system – is this the only way of doing things? Consider its impact on elderly and disabled patients who may have difficulty with using phones (e.g., taking to long to re-ring when engaged putting them outside 'call window')	Primary care team/ GPs. Ongoing
Face to face	Review restrictions on face to face appointments ensure patient choice. Consider how technology (video calls) can help older people to feel more connected with their GP. Consider 'capability' of older cohort (e.g., do they have smart phones/Wi-Fi?)	Primary care team /GPs. Ongoing
Travel	Older patients are walking to appointments. This will mean	Primary care team.

they will no longer do this when transferred to Vista Rd.

Home visits may be requested more often.

Ensure Home visit system is responding to need and being monitored for uptick in demand.

7. Is there evidence that the Public Sector Equality Duties will be met

PSED Objective 1: Eliminate discrimination, victimisation, harassment and any unlawful conduct that is prohibited under this act:

Primary care services will be continued to be provided and accessible to all.

PSED Objective 2: Advance Equality of opportunity.

PSED Objective 2: Section 3. sub-section a) remove or minimise disadvantages suffered by people who share a relevant protected characteristic that are connected to that characteristic.

Older people report they are more ready to walk to appointments but will be unable to do this. Older people are less likely to own/drive a car and the public transport is not fit for purpose.

This means that home visits will be provided to older people who can not get to surgery if they need face to face appointment.

Or alternative forms of transport could be explored.

PSED Objective 2: Section 3. sub-section b) take steps to meet the needs of people who share a relevant protected characteristic that are different from the needs of people who do not share it

Older people tend to request face to face appointments, for various reasons (see section 4 above) - these can be provided, however, GPs need to consider the limitations they may be creating by using technology with older patients. — do they own a smart phone, do they have wi-fi that can facilitate video calling, do they have privacy etc. section 3 & 4 above gives details of particular views and needs.

PSED Objective 2: Section 3. sub-section c) encourage people who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such people is disproportionately low.

All protected characteristics can register with GPs and be provided with primary care.

PSED Objective 3: Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

This objective is not engaged.

Health Inequalities: Have regard to the need to reduce inequalities between patients in access to health services and the outcomes achieved (s.14T);

The removal of a service within a small geographic setting, making it more difficult to reach a GP is by default creating a health inequality in terms of access. However, the catchment of Vista Rd still applies and covers all Burtonwood patients, it may be less convenient, but access is still there. Alternative GP services are available.

PSED Section 2: Consider and make recommendation regards implementing PSED in to the commissioning process and service specification to any potential bidder/service provider (private/ public/charity sector)

Ensure that service providers can provide a service to all patients and that indirect discrimination does not come in to play.

8. Recommendation to Board

Guidance Note: will PSED be met?

PSED will be met.

Older people will feel the impact of the move, especially those that use to walk to appointments. However, it's not discriminatory and the closure of the service is lawful under the Equality Act 2010. Wherever there is a facility for public good (e.g. school, library, swimming pool, park, community centre, hospital, GP surgery) they service a 'catchment area'. There will be 'lucky' people who live close to the facility- those who happen to live further away are not being discriminated against simply because a public resource cannot be geographically of equitable distance to everyone.

What is left is a matter of convenience, for some it may be very convenient to have a service close to them and less so for others. The decision to close the Burtonwood site is based on business reasons. If the provider genuinely feels they cannot provide a service, then the service must close. Access to medical care remains via other outlets, and the 'home visiting' service could be used to fill the gap where older patient are not able to travel to appointments.

Attention must be given as to what type of service is available and on offer. Participants of the questionnaire identified the need for more face to face appointments (and didn't like telephone appointments) and wanted a fairer, easier accessible 'making appointment' system.

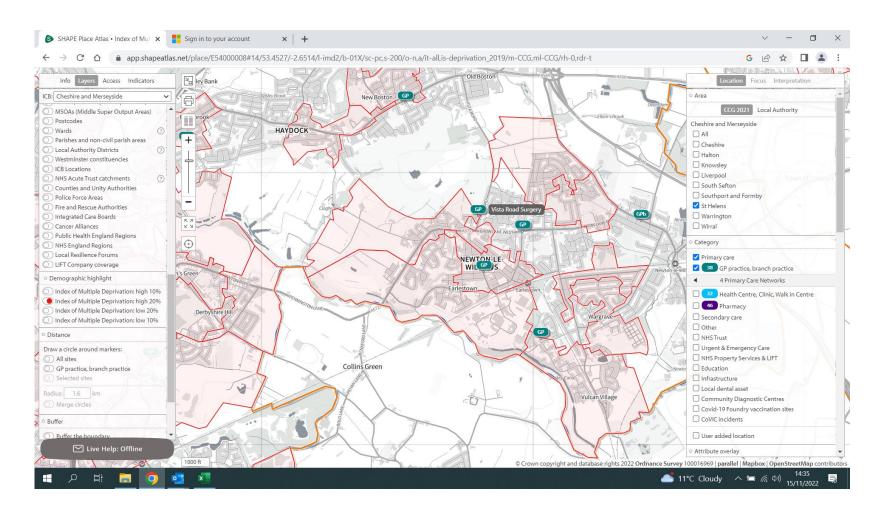
Older people particularly suffer under arrangements that rely on technology linked to rules/criteria – even using the phone can be problematic. Without some redress, service providers could easily slide into indirect discrimination against older people – this is

where a provision, practice, policy puts one protected characteristic at a disadvantage over another.

9. Actions that need to be taken

Consider areas of concern listed by participants of questionnaire – see section 4 & 6 above.

Appendix A- Shape Atlas, Index of Multiple Deprivation High 20%. Vista Road Surgery below



Appendix B

Supporting patients with relocation, access to engagement/communication, dispersal (delete as appropriate)

The checklist will assist GP to support transfer of patients, enable access to engagement and communication and ensure legal duties are met.

The following list is not exhaustive however provides an overview of the groups of patients that GPs are required to identify to support transition and dispersal of patients on ground of:

- 1. Clinical need
- 2. Disability and frailty
- 3. Social isolation
- 4. Information and communication needs
- 5. Social vulnerability and poverty

By working through patient lists this will support and mitigate any barriers to accessing relevant engagement and communications and assist with prioritising any potential transfer.

	communications and assist with prioritising any potential transfer.
Category	
GP vulnerable	Housebound
Patient list	Palliative
	Learning Disability
	Mini mental state >25
	Memory Loss Symptom
	Patients on cancer treatments
Age	Patients over 65 years who have difficultly to travel
	 Patients who may not have access to a computer.
	Transition may impact on repeat prescriptions and access to
	medication
	Isolated older people
	Young carers
	Looked after children and young people
	Children who experience domestic violence
	Patients within care home
Disability and	Patients with dementia
or	Patients with severe depression or mental illness
impairment	 Information and communication needs of
	Deaf/deaf patients who will require electronic info by e mail or
	text, interpretation or BSL translation
	Visually impaired patients
	Learning disability
	Autistic patients
	 Patient's with Physical Disability / Mobility issues
	Physical disability/ housebound
	Patients with severe mental health issues/ housebound

Race	Ensure patients whose first language is not English are communicated with by an appropriate means. E.g Interpreter or information is translated.
Sex	Women who have experienced domestic violence. Pregnant mothers with identified clinical risk / concerns.
Transgender	Transgender patients have significantly poor mental wellbeing outcome and health inequalities compared to any other cohort or population group. Trans people are 40 % risk of attempting suicide.
Health inequalities and Inclusion Health	Socially vulnerable due to poverty Patients on drug misuse treatments Homelessness Asylum seekers and refugees Sex workers Patients who have left the criminal justice system
Safeguarding and patient safety	Patients with safeguarding concerns and or at risk

Appendix C

Equality comments (Vista Rd/Burtonwood) Common themes from the comments²:

- Disappointment at closure
- Lack of face to face appointments
- Difficulty in making appointments.
- Bus travel & travel to Vista Rd.
- Worry how older people will access services.

The comments below are all the comments made by respondents – they have been separated in to 'comments from men', 'comments from women' and 'comments linked to people with disabilities.

In looking at the comments below, there are common themes that run through each protected characteristic, showing that there is a common view and position.

Men:

seems a Faitaccompli, in which case i will move practice

re open Kinnock park for nurse led for triage and blood tests, injections, dressings this would greatly assist non drivers

How can you ask if patients have visited the Burtonwood Branch in the last 12 months and include that in your data analysis, when it has been closed for double that length of time at least.

Burtonwood is growing community, the bus service is every 2 hours with the bus stopping in earlestown and the surgery is 10 minute walk away. when the surgery was in market street at least we had buses to get us there.

outrageous with the budget your practice receives and what you pay for out of date doctors when a trainee Mohsin is better at both. want a surgery i can walk too rather than take bus or taxi, have a Doctor at B/WOOD even for 1/2 day basis

Reinstate online booking of face to face appointments and allow access to test results on line

Questions 3 and 6 are invalid as Burtonwood site could not be visited in the last 12 months due to continued closure of the branch surgeries since Covid-19. There is no regular public transport provision to the vista road surgery from Burtonwood. The Burtonwood and Winwick Community Bus scheme provides transport, but this receives no NHS funding and is staffed by volunteers. If I was unable to cycle I would require a taxi of the community bus to attend the surgery. There is cycle parking at Vista Road surgery but it is difficult to use and could be improved. Healthcare provision in Burtonwood has been neglected for many years, improved surgery provision is badly needed. Other areas have Hubs for healthcare, I think Burtonwood needs a Healthcare Hub to improve health outcomes in the village.

the older people have had no choice but to find someway of getting to Vista Road

² The comments are directly lifted from the questionnaire – there has been no editing, or changes to spelling, grammar or syntax

bus services need to be better for those without transport

Driven Burtonwood up to speak, the walk from the bus stop is too far for me and the car park at Vista Road is a nightmare

i understand the shortage of Gps nationwide but the local surgery in Burtonwood is very handy for local people not everyone has a car or a driver to take them to Vista Road the medical and admin staff at vista road are superb. It is their credit that the main body of staff have been in post and there are no constant locums. I understand the immense pressures on the practice and have no complaints

we do get a good response from Drs when we get to speak to them

very dissatisfied to loose Burtonwood, a lot of old people would now have to travel to Vista Road very inconvenient and costly, a cost a lot of people cannot afford

as pensioners would prefer app at vista road not somewhere in st helens

bring back face to face same day appointments, not telephone one day to see the doctor the next day

i do not understand why vista road is taking all the pressure when there are other practices available? eg patterdale lodge another question is seeing as they are cheshire and not in merseyside why is warrington districts not considered such as penketh and sankey?

With Burtonwood surgery closed for at least the last 2 years and all the staff moved to Vista Road the services to see a doctor has got worse when people are sick they don't want to wait weeks to see a doctor. With same staff at Vista Road for at least 2 years I can't see how closing Burtonwood will make any difference

Although the reception is mainly 100% I do feel the service is lacking in getting to the doctor face to face as you say there is a lack of doctors and nurses but relatives in Ashton don't seem to have a problem seeing the doctor at all and Lancashire seem to be brilliant I have thought about leaving practice but don't really

I would like to be able to reach the service without spending ages on the phone (more phones) perhaps

There should be more face to face appointments ordering a prescription is too hit and miss waiting on phone for ages. The people who have to pay for minutes must have a massive phone bill I think doctors are losing the personal touch what people need when worried is a doctor to reassure them face to face closing burtonwood is no answer for the people of the village many people do not have cars or are not well enough to travel and wont ask a doctor out many people are old and alone

Made more face to face appointments available made the time scale of 8-8.30 longer to be able to access an appointment

Keep up the good work, Merry Christmas.

Not good for people that live in Burtonwood them having to travel further than than they usually have to, elderly and young should have the service near them, they need to keep this open for residents there, it's hard to find d parking at vista Road as it's not big enough for everyone and certainly not with more patients bigger car park needed and more doctors quicker appointments for all

Whilst i'm registered at the Vista road surgery i live in Burtonwood. I've never had to actually visit either surgery in person but i understand the reasoning behond closing the Burtonwood surgery. Personally travel to Vista road is not an issue for me.

Could the infrastructure ie car parking sustain the increase in patient numbers

The question about how many times I have visited is false because it's not been open, I think it's wrong burtonwood has to share 2 surgeries with Newton, especially when both have been shut, I can drive to the vistard, but unfortunately many can't and a bus is every 2 hours, it's wrong we deserve our own surgery.

Women:

shared facility with Patterdale lodge. re open kinnock park remedy H& S failures sample pots available to collect from the pharmacy send updates post tests/x rays even if not of concern, no news is good news approach fails as my mothers x ray at whiston was never received at the practice

The car park is not big enough. There's always a struggle to find a space.

We feel we are treated like 2nd class citizens in Burtonwood. There are more than enough people in the village to warrant a local surgery. Why not use Church hall for all practices? just a suggestion

not sure there is anything good about the closure of Burtonwood surgery. There are vulnerable people who would find it difficult to travel to Vista Road

I live on my own and at the moment can still drive. My concern is that public transport goes nowhere near the main surgery and is limited to 1 every hour, sometimes 2

Although disappointed, i understand the reasons. However Burtonwood has grown vastly over the years and many disagree with final closure, i use the online service now and find it Excellent i will be phoned or invited in accordingly= Excellent . I currently have no problems using Vista Road (other than parking) but feel sorry for residents who do not or cannot drive, the community bus MUST remain please!

i rely on my daughter to pick me up to get to the surgery cant rely on buses, one long walk from market square and 2 hour bus wait I'm 86 and registered disabled

happy with appts with the nurses, would like to see at doctor at times also requested to have cyst removed but have had to get an appt at hospital which isn't until March please consider a lot of the burtonwood population are elderly and rely on walking therefore travel expenses will increase

when I visit Vista Road i find there are no parking spaces

where will people go if they cant get to vista road, what other practices are in Burtonwood?what other choices of surgeries are there? burtonwood is little village and easily accesible to surgery and not have to travel

i think closing Burtonwood would be very sad for the people, especially those without a car.I would prefer to attend Bwood site but was told im not allowed as i live outside of burtonwood

More people answering phone at 8 am so we wouldn't be cut off after being told 5 in queue

I have complete trust in the doctors and staff. I don't want to leave the Vista Road

Getting an appointment is dam near impossible I have no issue with you closing Burtonwood but how about you provide an evening service at the main practice

It is very frustrating hen ringing surgery from 8am getting a answer at 8.45 to be told all appointments are gone the receptionist always try to be helpful so its not down to them As I am disabled I have to make transport arrangements to access Vista Road. We have not been able to visit surgery as unable to get face to face GP approintment.

We need a GP service in Burtonwood Patterdale Lodge are seeing patients face to face why cant Vista Road

It costs a fortune in a taxi to get to Vista Road theres no reason to close Burtonwood

1 Being able to see a Dr 2 We moved to Burtonwood because the Drs was near 3 .If we did not have a car we would change Dr

I think the elderly people of Burtonwood need their own surgery, as many of them dont have their own transport and the bus service is not always available for the appointment time.

I have lived in Burtonwood for almost three years. I managed to register but the surgery has been closed since. Your questionnaire is very misleading and your results will be skewed because of this. Very manipulative to meet a certain agenda! No one has accessed the surgery because it's been closed and locked for years! People have no choice but to travel or change surgeries. The local people are being massively failed here. As a 28 year old, I am more likely to put off visiting a GP because it's harder to travel to vista road and requires more time out of work. This can have catastrophic effects on people's health! Such a huge failing for local people. I wonder what the long-term implications will be of poor health services. Will you do a follow-up study to see the impact of not having local access for local people? Or will you manipulate that data too? I do not support the planned closure and believe that services needed to be provided within the village!

I understand there is more need for gp services but I don't understand why the Burtonwood surgery couldn't be open for a couple of days a week to help residents who have difficulty getting to vista road site because public transport to get to vista road isn't a direct service. Also the car parking situation at vista road is very difficult, even getting an appointment is difficult.

Offer the ability for patients to book appointment slots online

I can understand the reason to close Burtonwood surgery, but it is quite a journey for those residents to access clinicians. I have always been satisfied with the service both from doctors, nurses and surgery staff. I have accepted the telephone consultations but sometimes it is necessary to then see the doctor in person which seems to have wasted time.

My family and I can easily get to Vista Road surgery by car when necessary. However I know that is not the case for a lot of Burtonwood's elderly residents. There is no direct bus route to the surgery and for patients without transport it is to far to walk. The letter says home visits would remain available to residents in the Burtonwood area. Will there be a direct phoneline dedicated to patients from Burtonwood in need of a home visit? The practice already knows which patients will struggle to get to Vista Road. Therefore put a flag on those records, so the reception staff know which patients to prioritise for a home visit. I would like to know what the plans are for the surgery in Burtonwood. Sell? Renovate? Let it rot, which is what has been happening over the last 2 years.

Issues regarding the availability of getting appointments on the day or within a few days or ringing Vista Road surgery . More availability of face to face appointments with drs.

Online consultation are good. More narrow phone call times would be appreciated

Whilst we understand in principle the plans we would welcome more information in terms of whether there is going to be an increase in receptionists answering calls. Since COVID face to face appointments have been unavailable and this has not always felt satisfactory. There have been occasions where we would have valued seeing the dr face to face but have had to complete either telephone consultations or e consult. Both have their place however the telephone system isn't great as there is no scheduled time for call backs which makes it difficult when working. It is also near impossible to actually get an appointment unless you repeatedly ring back from 8am onwards. As this is the time we are getting ready for school and work this is problematic. It would be useful to have a designated time slot for those people needing face to face and a different slot for those wanting telephone consultation. We would imagine that with the increase in patients likely from this closure there will be an increase in appointment slots. The doctors have always been helpful when we have needed them but not always easily available.

I was not aware the was a surgery operating out of the Community Centre. This wasn't communicated to my household and no-one within the household who has needed an appointment has been offered any appointments at Burtonwood Surgery. I haven't made an appointment to see a GP principally because I can never get one when I call, and told to "call back tomorrow". Pointless. I certainly don't support the closure of the surgery, my for me or my household but for those who do not have transport to get to the Vista Road site. Public transport in the village is useless and would leave someone with health issues with a significant walk once they depart the bus or expensive taxi fairs. Shameful of the practice.

To close the Burtonwood practice for good would be devastating for the people of the village. There are a large proportion of pensioners who can't drive so getting to the Vista Road branch is not practical. I have needed the practice recently and found it very very difficult to even get through on the telephone. It is then almost impossible to get a recent appointment. I know the NHS is under tremendous pressure due to lack of staff and under funding but closure is not the answer. Even a part time opening would be better than nothing.

At present I am reasonably fit at 77 yrs of age and can drive to wherever I need to go but as I get older I would prefer to have access to a surgery closer to my home. I think this is very true for the many older residents of Burtonwood who do not have transport means. Also given the bus services to Burtonwood are few and far between I think many of them

would struggle to attend appointments in Newton-le-Willows. I am very fortunate that I have never needed to attend the surgery since the Burtonwood branch closed apart from on one occasion to receive a flu vaccine and didn't even attend for that this year as I got it at the same time as my covid vaccine at the vaccination centre. Throughout the 35 years I have lived in Burtonwood and been registered at the practice I have had nothing but praise for the service I have received and hope that this will continue.

This survey states the last 12 months however the Burtonwood surgery has been closed for over 2 years so how can you complete a form which has got incorrect information!

Absolutely disgusted by this idea, please explain how anyone could have attended the branch surgery at Burtonwood when it has been closed for 2.5 years, leaving those of us living in Burtonwood no other choice but to attend the Vista road site.

The proposed closure is certainly not convenient for patients like myself who don't drive and cannot rely on a very limited public transport (2 hourly) therefore have to request lifts. I have always been happy with the service provided, however I now tend not to make contact because of the difficulties getting through to the surgery and when you do it feels like you have to go through a telephone contact before any FaceTime face appointment is offered adding additional time before any necessary treatment is prescribed, I have missed a couple of telephone consultations because I didn't get to my phone before the caller rang off a second call 5 minutes later would be helpful and would prevent patients having to go through the whole booking appointment process again, sending a text 10/15 minutes prior to getting a call would be helpful resulting in less missed calls especially when you only get told the call will be morning or afternoon which is not very helpful when patients like myself a carer are busy and do not deliberately miss a call and don't carry our phones everywhere. Its almost impossible to get an evening appointment or on specific days, therefore the ability to book appointments on line via patients access, or the option of completing an on line problem/symptom advice form for quick treatment advice or quick prescribed treatment without having to access the surgery.

Easier access to appointments, more face to face appointments, doctors to deliver test results so they can be discussed.

People with Disability:

The car park is not big enough. There's always a struggle to find a space.

outrageous with the budget your practice receives and what you pay for out of date doctors when a trainee Mohsin is better at both. want a surgery i can walk too rather than take bus or taxi, have a Doctor at B/WOOD even for 1/2 day basis

Driven Burtonwood up to speak, the walk from the bus stop is too far for me and the car park at Vista Road is a nightmare

we do get a good response from Drs when we get to speak to them

i rely on my daughter to pick me up to get to the surgery cant rely on buses, one long walk from market square and 2 hour bus wait I'm 86 and registered disabled

as pensioners would prefer app at vista road not somewhere in st helens

With Burtonwood surgery closed for at least the last 2 years and all the staff moved to Vista Road the services to see a doctor has got worse when people are sick they don't want to wait weeks to see a doctor. With same staff at Vista Road for at least 2 years I can't see how closing Burtonwood will make any difference

I would like to be able to reach the service without spending ages on the phone (more phones) perhaps

I have complete trust in the doctors and staff. I don't want to leave the Vista Road

Made more face to face appointments available made the time scale of 8-8.30 longer to be able to access an appointment

It is very frustrating hen ringing surgery from 8am getting a answer at 8.45 to be told all appointments are gone the receptionist always try to be helpful so its not down to them As I am disabled I have to make transport arrangements to access Vista Road. We have not been able to visit surgery as unable to get face to face GP approintment.

It costs a fortune in a taxi to get to Vista Road theres no reason to close Burtonwood

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I understand there is more need for gp services but I don't understand why the Burtonwood surgery couldn't be open for a couple of days a week to help residents who have difficulty getting to vista road site because public transport to get to vista road isn't a direct service. Also the car parking situation at vista road is very difficult, even getting an appointment is difficult.

I can understand the reason to close Burtonwood surgery, but it is quite a journey for those residents to access clinicians. I have always been satisfied with the service both from doctors, nurses and surgery staff. I have accepted the telephone consultations but sometimes it is necessary to then see the doctor in person which seems to have wasted time.

Issues regarding the availability of getting appointments on the day or within a few days or ringing Vista Road surgery . More availability of face to face appointments with drs. Could the infrastructure ie car parking sustain the increase in patient numbers

Absolutely disgusted by this idea, please explain how anyone could have attended the branch surgery at Burtonwood when it has been closed for 2.5 years, leaving those of us living in Burtonwood no other choice but to attend the Vista road site.

Appendix 4

Engagement, Involvement, Consultation and Communication Checklist - pre decision

Purpose of the Activity: engagement with patients on the proposed branch surgery closure
At Kinnock Park, Burtonwood

Officer Support: Kirk Benyon

Who?	How?	When?	Who
Registered Patients / carers across Vista Road Surgery	Survey – online / hard copy Drop in sessions FAQ Patient Letter Practice website	November/December 2022	Practice
Those identified on EIA	By telephone	November/December 2022	Practice
Local Councillors	Briefing letter	November/December 2022	Primary Care Team
Neighbouring Practices including Warrington Practices	Briefing letter	November/December 2022	Primary Care Team
Other GP Practices	Briefing letter	November/December 2022	Primary Care Team
Local Pharmacies	Briefing letter	November/December 2022	Primary Care Team
Patient Participation Group	Open Discussion at PPG meetings		Practice
Local Residents	Not required as targeted piece of work with patients / carers registered		
Local Community Groups	Not required as targeted piece of work with patients / carers registered		
Other local allied health care professional organisations	Not required as targeted piece of work with patients / carers registered		
PALS	Inform PALS of proposal Provide copy of FAQ Survey Letter	November/December 2022	Primary Care Team
Healthwatch	Inform Healthwatch of Proposal Provide copy of FAQ Survey Letter	November/December 2022	Primary Care Team
LMC	Develop Briefing to be sent	November/December 2022	Primary Care Team
Overview and Scrutiny Committee	Develop Briefing to be sent	January 2023	Primary Care Team

St Helens Place Primary Care Group and Warrington Place Primary Care Group	Formal Report to support recommendation	August 2023	Primary Care Team
St Helens Place Primary Care Group	Report detailing proposal and process for information to finalise decision.	Jan 24	Primary Care Team
Social Media	Not used as patients directly targeted with letters.		
Press releases	Not used as patients directly targeted with letters		

Appendix 5

Engagement, Involvement, Consultation and Communication Checklist - post decision

Purpose of the Activity: engagement with patients on the proposed branch surgery closure
At Kinnock Park, Burtonwood

Officer Support: Kirk Benyon

Who?	How?	When?	Who
Registered Patients / carers across Vista Road Surgery	Patient Letter Posters In Surgery Drop in sessions if required FAQ Practice website	Post decision	Practice
Those identified on EIA	By telephone	Post decision	Practice
Local Councillors	Briefing letter	Post decision	Primary Care Team
Neighbouring Practices including Warrington Practices	Briefing letter	Post decision	Primary Care Team
Other GP Practices	Briefing letter	Post decision	Primary Care Team
Local Pharmacies	Briefing letter	Post decision	Primary Care Team
Patient Participation Group	Open Discussion at PPG meetings		Practice
Local Residents	Not required as targeted piece of work with patients / carers registered		
Local Community Groups	Not required as targeted piece of work with patients / carers registered		
Other local allied health care professional organisations	Not required as targeted piece of work with patients / carers registered		
PALS	Inform PALS of decision Provide copy of FAQ Letter Information about alternative practices Details of how to move practice	Post decision	Primary Care Team
Healthwatch	Inform Healthwatch of Proposal Provide copy of FAQ Letter Information about alternative practices	Post decision	Primary Care Team

	Details of how to move practice		
LMC	Briefing letter	Post decision	Primary Care Team
Overview and Scrutiny Committee	Develop Briefing to be sent	Post decision	Primary Care Team
Social Media	Patients will be contacted directly so won't be used		
Press releases	Patients will be contacted directly so won't be used		